Revision: HCFA-PM-91-4 AUGUST 1991

(BPD)

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

Page 8 OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	a.		North	Caroli	na					
	50	ate:								
D. MEDI	CALL	Y NEEDY	<u>IN</u>	COME LI	EVELS (Co	ntinue	<u>a)</u>			
X	Ap	plicabl	e to all o	groups.		tho	licable to se specifi up income ted on an	ed belo levels	ow. Exc	epted o
(1)		(2)			(3)		(4)		(5)	
Family Size	pro mair	income otected otenancemor	for entry	Column xceeds	limits ied in R	fo l rural	ncome leve r persons iving in areas for months	exc exc	unt by wolumn (4 eeds limecified 42 CFR 35.1007	i) nits in
_7	urba	an & ru	cal							
1	\$	242		\$		\$_			\$	
2	\$	317		\$					\$	
3	<u>.</u>	367		\$		\$			\$	
4		400		\$		\$			\$	· ·
_For eaddi- tional person add:		go to	page 9		·	•			\$	
<u>1</u> /	yment						its claim income ex		FP	,
TN No.		2-01	Approval	Date	10-21-9	2	Effective	Date	1/1/92	:
TN No.					· · · · · · · · · · · · · · · · · · ·		HCFA ID:	7985E		
							ucty In:	13035		

SUPPLEMENT 1 TO ATTACHMENT 2.6-A Revision: HCFA-PM-91-4 (BPD) AUGUST 1991 Page 9 OMB No.: 0938-STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State: North Carolina INCOME LEVELS (Continued) D. MEDICALLY NEEDY (2) (3) (4)(5) Net income level Amount by which Family Net income level Amount by which Column (2) for persons Column (4) Size protected for maintenance for exceeds limits living in exceeds limits specified in rural areas for specified in ___l__months ___months 42 CFR 42 CFR 435.10071 $435.1007^{1/2}$ /X urban only / / urban & rural 433 \$ 5 \$ 467 500 525 542 575 10___ \$ see page 9a For each additional person, add:

 $^{1\prime}$ The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

TN No. 92-01 Supersedes TN No. NEW	Approval Date	10-21-92	Effective	Date <u>1/1/92</u>
111 1101 1111			HCFA ID:	7985E

State	North	Carolina

D. MEDICALLY NEEDY - continued

	Net income level protected for maintenance for 1 month
Family Size	
11 12 13 14	\$600 \$633 \$667 \$700
each additional	\$ 33

TN No. 92-01 Supersedes TN No. NEW

Approval Date 10-21-92

Eff. Date 1/1/92

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: North Carolina

INCOME LEVELS (Continued)

- E. Optional Groups Other Than the Medically Needy
 - 1. Institutionalized Individuals Under Special Income Levels as follows: